

87 Nepperhan Ave
Room 212
Yonkers, NY 10701

CITY OF YONKERS
STREET CLOSING
LICENSE APPLICATION

Phone: 914-377-6808
Fax: 914-377-6811
Website:
www.YonkersNY.gov

INSTRUCTIONS FOR USING THIS FORM

Please Note:

If the required supporting documents are not submitted with the application, it will result in the delay and/or denial of the application.

Requirements:

1. The enclosed resident's approval form must be returned to our office at least FOUR WEEKS prior to the requested street closing, as it must be approved by seven city agencies.
2. Permit fee of \$10.00 per day (check or money order only) made payable to the "City of Yonkers", must be returned with application.
3. This form must be signed by at least 50% of the residents living on the street which is to be closed.
4. Permit is good only on the date for which it is issued. (NO RAINDATE)
5. The person or organization to whom a permit is issued will be responsible for seeing that all rules, regulations, and ordinances of the City of Yonkers and the Office of Licensing/Consumer Protection/Weights & Measures are observed, and that the party preserves order and decorum..
6. Public address systems are not permitted.
7. All paper and refuse must be collected and placed in the proper receptacles at the conclusion of the street closing.
8. Street closings must end by 10pm.
9. NO FIREWORKS ALLOWED (S. 1, CHAPTER 43-130, CITY ORDINANCES)
10. Barricades, if available, will be provided by the Department of Public Works.
11. Barricades are to be used for PEDESTRIAN SAFETY ONLY, and must be able to be moved quickly if necessary.
12. Streets must be accessible to Emergency Vehicles at all times and must not be blocked off by automobile, truck, or any other vehicle.

LICENSING FEES AND EXPIRATION DATE

\$10.00/day **License expires no later than 10pm on the date of issuance.**

Philip A. Amicone, Mayor
Office of Municipal Code Violations, Frank J. McGovern, Executive Director
Consumer Protection Bureau, Kerry O'Brien, Director

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Residents' Approval Form

Pursuant to the provisions of the Code of the City of Yonkers, I the undersigned respectfully petition for the below-listed license in the City of Yonkers, and for that purpose, I hereby provide the following answers to the questions contained herein.

Sponsoring Individual or Organization:

Address:

Telephone #:

City:

State:

Zip:

Location:

Between:

AND

Date(s) _____

From: _____ To: _____
From: _____ To: _____
From: _____ To: _____
From: _____ To: _____

Purpose of Street Closing:

List below the signatures and Addresses of residents approving (use additional paper if necessary):

Name	Address

Philip A. Amicone, Mayor
Office of Municipal Code Violations, Frank J. McGovern, Executive Director
Consumer Protection Bureau, Kerry O'Brien, Director